

County: Waukesha  
 MASONIC HEALTH CARE CENTER INC  
 400 N MAIN ST  
 DOUSMAN 53118 Phone:(262) 965-9245

Facility ID: 9540

Page 1

Operated from 1/1 To 12/31 Days of Operation: 366  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/04): 84  
 Total Licensed Bed Capacity (12/31/04): 84  
 Number of Residents on 12/31/04: 83  
 Ownership: Non-Profit Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? Yes  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 82

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	45.8	
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years	42.2	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.2	More Than 4 Years	12.0	
Day Services	No	Mental Illness (Org./Psy)	47.0	65 - 74	2.4		----	
Respite Care	No	Mental Illness (Other)	3.6	75 - 84	18.1		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	63.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	14.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.2		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.2		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	7.2	65 & Over	98.8	-----		
Transportation	No	Cerebrovascular	10.8		-----	RNs	9.4	
Referral Service	No	Diabetes	3.6	Gender	%	LPNs	8.0	
Other Services	Yes	Respiratory	0.0	-----		Nursing Assistants,		
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	25.3	Male	22.9	Aides, & Orderlies		
Provide Day Programming for Developmentally Disabled	No		100.0	Female	77.1			
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					100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care		Per Diem (\$)	Total Resi- dents	% Of All	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%				
Int. Skilled Care	0	0.0	1	2.0	148	0	0.0	0	0	0.0	0	0	0	0	1	1.2
Skilled Care	2	100.0	47	92.2	126	1	100.0	139	27	93.1	188	0	0.0	0	77	92.8
Intermediate	---	---	3	5.9	106	0	0.0	0	2	6.9	162	0	0.0	0	5	6.0
Limited Care	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0	51	100.0		1	100.0		29	100.0		0	0.0		83	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		Activities of		% Needing Assistance of		Total
Percent Admissions from:		Daily Living (ADL)	% Independent	One Or Two Staff	% Totally Dependent	Number of Residents
Private Home/No Home Health	17.3	Bathing	0.0	67.5	32.5	83
Private Home/With Home Health	0.0	Dressing	1.2	75.9	22.9	83
Other Nursing Homes	8.6	Transferring	13.3	63.9	22.9	83
Acute Care Hospitals	53.1	Toilet Use	9.6	54.2	36.1	83
Psych. Hosp.-MR/DD Facilities	0.0	Eating	50.6	31.3	18.1	83
Rehabilitation Hospitals	7.4	*****				
Other Locations	13.6	Continence		%	Special Treatments	%
Total Number of Admissions	81	Indwelling Or External Catheter	3.6	Receiving Respiratory Care	10.8	
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	50.6	Receiving Tracheostomy Care	0.0	
Private Home/No Home Health	20.5	Occ/Freq. Incontinent of Bowel	30.1	Receiving Suctioning	0.0	
Private Home/With Home Health	0.0	Mobility		Receiving Ostomy Care	0.0	
Other Nursing Homes	0.0	Physically Restrained	1.2	Receiving Tube Feeding	0.0	
Acute Care Hospitals	5.5	Skin Care		Receiving Mechanically Altered Diets	66.3	
Psych. Hosp.-MR/DD Facilities	0.0	With Pressure Sores	2.4	Other Resident Characteristics		
Rehabilitation Hospitals	0.0	With Rashes	1.2	Have Advance Directives	100.0	
Other Locations	13.7			Medications		
Deaths	60.3			Receiving Psychoactive Drugs	56.6	
Total Number of Discharges (Including Deaths)	73					

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Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership:		Bed Size:		Licensure:		All Facilities	
		Nonprofit %	Peer Group Ratio	50-99 %	Peer Group Ratio	Skilled %	Peer Group Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.6	87.4	1.12	88.2	1.11	87.3	1.12	88.8	1.10
Current Residents from In-County	84.3	86.8	0.97	88.5	0.95	85.8	0.98	77.4	1.09
Admissions from In-County, Still Residing	40.7	21.8	1.87	21.6	1.89	20.1	2.03	19.4	2.10
Admissions/Average Daily Census	98.8	159.1	0.62	187.2	0.53	173.5	0.57	146.5	0.67
Discharges/Average Daily Census	89.0	159.6	0.56	182.1	0.49	174.4	0.51	148.0	0.60
Discharges To Private Residence/Average Daily Census	18.3	63.2	0.29	76.7	0.24	70.3	0.26	66.9	0.27
Residents Receiving Skilled Care	94.0	96.1	0.98	96.7	0.97	95.8	0.98	89.9	1.05
Residents Aged 65 and Older	98.8	96.5	1.02	89.4	1.11	90.7	1.09	87.9	1.12
Title 19 (Medicaid) Funded Residents	61.4	50.4	1.22	48.4	1.27	56.7	1.08	66.1	0.93
Private Pay Funded Residents	34.9	33.2	1.05	31.2	1.12	23.3	1.50	20.6	1.70
Developmentally Disabled Residents	0.0	0.5	0.00	0.2	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	50.6	33.9	1.49	34.7	1.46	32.5	1.56	33.6	1.51
General Medical Service Residents	25.3	26.1	0.97	23.5	1.08	24.0	1.05	21.1	1.20
Impaired ADL (Mean)	56.1	51.2	1.10	50.4	1.11	51.7	1.09	49.4	1.14
Psychological Problems	56.6	62.3	0.91	58.0	0.98	56.2	1.01	57.7	0.98
Nursing Care Required (Mean)	10.1	7.1	1.43	7.3	1.39	7.7	1.31	7.4	1.36

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